Fill in this information to identify your case:							
Debtor 1	David Karl Brecht						
Debtor 2 (Spouse, if filing)							
United States E	Bankruptcy Court for the:	Eastern District of Pennsylvania					
Case number (if known)	23-10659						

According to the calculations required by this Statement:						
 1. Disposable income is not determine 11 U.S.C. § 1325(b)(3). 	ed under					
2. Disposable income is determined u U.S.C. § 1325(b)(3).	nder 11					
3. The commitment period is 3 years.						
☐ 4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	1: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one or	nly.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11.							
10 th	Il in the average monthly income that you received from all 01(10A). For example, if you are filing on September 15, the 6-ne 6 months, add the income for all 6 months and divide the tota bouses own the same rental property, put the income from that property.	nonth perion	od would in the re	be March 1 throusult. Do not includ	ւgh Auզ de any i	gust 31. If the amo	ount of your monthly incom ore than once. For examp	e varied during le, if both
					Colur Debte		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and con	nmissio	ons (before all	\$	0.00	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	e paymen	its from	a spouse if	\$	1,932.00	\$	
4.	All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your househol and roommates. Do not include payments from a spou you listed on line 3.	t. Include d, your d	regular epende	contributions nts, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor 1	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fair	rm \$	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor 1	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	- \$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

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Case number (if known) 23-10659

					Column A	· ·	Column B Debtor 2 non-filing	or		
7.	Interest, o	lividends, and royalties			\$	0.00	\$			
8.	Unemplo	yment compensation			\$	0.00) \$			
		ter the amount if you contend t Security Act. Instead, list it he	hat the amount received was a bre:	penefit under	r					
	For you		\$	0.00						
	For you	r spouse	\$							
9.	benefit un not include United Sta disability, pay paid u does not e	der the Social Security Act. Alse any compensation, pension, ates Government in connection or death of a member of the under chapter 61 of title 10, the exceed the amount of retired passes.	include any amount received that so, except as stated in the next spay, annuity, or allowance paid be with a disability, combat-related informed services. If you received in include that pay only to the extra to which you would otherwise ther than chapter 61 of that title.	sentence, do by the I injury or d any retired tent that it		0.00) \$			
10.	Do not increceived a domestic tunited Statistically,	lude any benefits received und is a victim of a war crime, a cri terrorism; or compensation, pe tes Government in connection	ed above. Specify the source a der the Social Security Act; paym me against humanity, or internat nsion, pay, annuity, or allowance with a disability, combat-related informed services. If necessary, I total below.	nents iional or e paid by the I injury or		0.00				
	_				\$	0.00				
		otal amounts from separate pa	ages if any		\$	0.00	<u> </u>			
11. Part	each colu		income. Add lines 2 through 10 amn A to the total for Column B. ur Deductions from Income	for \$	1,932.00	_ + \$			1,932.00 otal average onthly income	
12. 13.	Copy you	r total average monthly inco	me from line 11. ck one:					\$	1,932.00	
	_	are not married. Fill in 0 below								
	☐ You	are married and your spouse is	s filing with you. Fill in 0 below.							
	☐ You a	are married and your spouse is	s not filing with you.							
			ed in line 11, Column B, that was e spouse's tax liability or the spo							
	adjus	w, specify the basis for excludi stments on a separate page. s adjustment does not apply, e	ng this income and the amount onter 0 below.	of income de	voted to ea	ach purpo	se. If necessar	y, list addi	tional	
				\$						
				\$						
										
		Total		. \$	0	.00	Copy here=>		0.00	_
14.	Your cu	rent monthly income. Subtr	act line 13 from line 12.					\$	1,932.00	
15.			me for the year. Follow these s	teps:				•	1,932.00	
	15a. Co	ppy line 14 here=>						\$.,002.00	

David Karl Brecht

Debtor 1

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Debte	or 1	Dav	rid Karl Brecht		Case number (if known)	23-10659	
		М	ultiply line 15a by 12 (the number of months in a	year).			x 12
	15	b. Tł	ne result is your current monthly income for the y	ear for this part of the	e form		\$23,184.00
16	. Cal	culate	e the median family income that applies to you	u. Follow these steps	s:		
	16a	. Fill ir	n the state in which you live.	PA			
	16b	. Fill ir	n the number of people in your household.	4			
	16c	To fi	n the median family income for your state and siz nd a list of applicable median income amounts, g uctions for this form. This list may also be availab	go online using the lir			\$113,037.00
17	. Hov	v do t	he lines compare?				
	17a	. •	Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NO				
	17b	. \square	Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcula your current monthly income from line 14 abo	tion of Your Dispos			
Par	t 3:	Ca	alculate Your Commitment Period Under 11 U.	S.C. § 1325(b)(4)			
18.	Cop	у уоц	ur total average monthly income from line 11 .	•		\$	1,932.00
19.	spo	end t	he marital adjustment if it applies. If you are me hat calculating the commitment period under 11 lincome, copy the amount from line 13. The marital adjustment does not apply, fill in 0 on lincome.	U.S.C. § 1325(b)(4) a		ur - \$ _	0.00
	19b	. Sub	tract line 19a from line 18.				\$1,932.00
20.	Cal	culate	e your current monthly income for the year. F	ollow these steps:			
	20a	Cop	y line 19b				\$1,932.00
		Mult	iply by 12 (the number of months in a year).				x 12
	20b	. The	result is your current monthly income for the yea	r for this part of the fo	orm		\$ 23,184.00
	20c	Cop	y the median family income for your state and siz	ze of household from	line 16c		\$ <u>113,037.00</u>
	21.	How	do the lines compare?				
			Line 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	ordered by the court	, on the top of page 1 of this fo	rm, check bo	x 3, The commitment
			Line 20b is more than or equal to line 20c. Unles commitment period is 5 years. Go to Part 4.	ss otherwise ordered	by the court, on the top of pag	e 1 of this for	rm, check box 4, <i>The</i>
Par	t 4:	Si	gn Below				
	By s	ignin	g here, under penalty of perjury I declare that the	information on this s	statement and in any attachme	nts is true and	d correct.
)	(/s/	Dav	id Karl Brecht				
			Karl Brecht re of Debtor 1				
	Date		oril 18, 2023				
	If vo		1 / DD / YYYY cked 17a, do NOT fill out or file Form 122C-2.				
			ecked 17b, fill out Form 122C-2 and file it with this	s form. On line 39 of	that form, copy your current me	onthly income	e from line 14 above.
	, .	J. J. 10					

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Debtor 1 David Karl Brecht Case number (if known) 23-10659